07/22/2008 15:06

(Rev. 12/2004)

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN 7 HANOVER SQUARE ADDRESS (number and street) C/O EDWARD KANE Check if different than previously **NEW YORK** NY 10004 reported. (ACC) **FEC IDENTIFICATION NUMBER STATE** ZIPCODE A CITY A IS THIS **AMENDED** NEW C00173393 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 Χ PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2008 06 30 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. John Hurley Type or Print Name of Treasurer Electronically Filed by John Hurley 07 22 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use

FE6AN026

Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC [®] D D 0.4 0 1 2008 0.6 3 0 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date Cash on Hand 2008 11385.15 January 1 (b) Cash on Hand at 11816.75 Begining of Reporting Period 2242.72 4565.44 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 14059.47 15950.59 6(a) and 6(c) for Column B) 6337.61 8228.73 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 7721.86 7721.86 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC

0 1 м м 0 4 м м 0 6 2008 2008 3 0 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 1960.00 1560.00 (i) Itemized (use Schedule A) 682.72 2605.44 (ii) Unitemized (iii) TOTAL (add 2242.72 4565.44 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 2242.72 4565.44 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 2242.72 4565.44 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 2242.72 4565.44 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 6250.00 7750.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 87.61 478.73 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 6337.61 8228.73 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)

6337.61

8228.73

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	2242.72	4565.44
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	2242.72	4565.44
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 14 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) GUARDIAN LIFE INSURANCE COM LIFE PAC			
Full Name (Last, First, Middle Initial) Michael Byrne			Date of Receipt
Mailing Address 206 Schindler Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.4302
Florham Park	NJ	07932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Guardian Life Insurance	Occupation Vice Pre-		Semi-Monthly Payroll Deduction
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify)		400.00	1
Other (specify)	0 0	0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) Michael Byrne			Date of Receipt
Mailing Address 206 Schindler Drive			05 29 YYYY 2008
City	State	Zip Code	Transaction ID: SA11AI.4303
Florham Park	NJ	07932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Guardian Life Insurance	Occupation Vice Pre-		Semi-Monthly Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Michael Byrne			Date of Receipt
Mailing Address 206 Schindler Drive			06 25 2008
City	State	Zip Code	Transaction ID: SA11AI.4304
Florham Park	NJ	07932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Guardian Life Insurance	Occupation Vice Pre-		Semi-Monthly Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		600.00	
SUBTOTAL of Receipts This Page (optional)			300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 14 (check only one) X
4	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
/	GUARDIAN LIFE INSURANCE COMF LIFE PAC	PANY OF AN	MERICA POLITICAL ACTION	N COMMITTEE (GUARDIAN
١.	Full Name (Last, First, Middle Initial) John Cifu			Date of Receipt
	Mailing Address 8 Brookside Drive			05 29 2008
	City Goshen	State NY	Zip Code 10924	Transaction ID: SA11AI.4306 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10324	50.00
	Name of Employer Berkshire Life Insurance Co Receipt For:		ice President	Semi-Monthly Payroll Deduction
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) John Cifu	1		Date of Receipt
	Mailing Address 8 Brookside Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.4307
	Goshen	NY	10924	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Berkshire Life Insurance Co	Occupatio Senior V	n ice President	Semi-Monthly Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) Michael Fleming			Date of Receipt
	Mailing Address 58 Colgate Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.4309
	Yonkers FEC ID number of contributing federal political committee.	C	10703	Amount of Each Receipt this Period 40.00
	Name of Employer Guardian Life Insurance	Occupatio Director	n	Semi-Monthly Payroll Deduction
	Receipt For: Primary General Other (specify)	+ +	e Year-to-Date ▼ 240.00	
	SUBTOTAL of Receipts This Page (optional)	1		140.00

	SCHEDULE A (FEC Form 3X FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 14 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \ \	or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee	to solicit contributions from such committee.
7	Full Name (Last, First, Middle Initial)	MPANY OF AMERICA POLITICAL ACTIO	·
Α.	John Foley Mailing Address 2 Gold St Apt 4703		Date of Receipt M M D D Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11Al.4311
	New York	NY 10038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Guardian Life Insurance	Occupation Insurance	Semi-Monthly Payroll Deduction
	Receipt For: Primary General	Aggregate Year-to-Date ▼ 400.00	
_	Other (specify)	900.00	
3.	Full Name (Last, First, Middle Initial) John Foley		Date of Receipt
	Mailing Address 2 Gold St Apt 4703		05 29 YYYYY
	City	State Zip Code	Transaction ID: SA11AI.4313
	New York	NY 10038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Guardian Life Insurance	Occupation Insurance	Semi-Monthly Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
_).	Full Name (Last, First, Middle Initial) John Foley	-	Date of Receipt
	Mailing Address 2 Gold St Apt 4703		0 6 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.4312
	New York FEC ID number of contributing federal political committee.	NY 10038	Amount of Each Receipt this Period 100.00
	Name of Employer Guardian Life Insurance	Occupation Insurance	Semi-Monthly Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Γ	CURTOTAL of Descirts This Desc (antional		300.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 14 (check only one) X
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) UARDIAN LIFE INSURANCE COMF	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Fu . <u>Ale</u>	FE PAC II Name (Last, First, Middle Initial) exander Grant ailing Address 345 Essex 57 St	7.11.1 31 7.11	ILLIIOAT GEITIGAE AGTIG	Date of Receipt
Cit	Apt 16D	State NY	Zip Code	Transaction ID: SA11AI.4314 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	10022	100.00
<u>Cc</u>	ame of Employer uardian Life Insurance cecipt For: Primary General Other (specify)	Occupatio Insuranc Aggregate		Semi-Monthly Payroll Deduction
. Ale	Il Name (Last, First, Middle Initial) exander Grant ailing Address 345 Essex 57 St Apt 16D			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	ty ew York	State NY	Zip Code	Transaction ID: SA11AI.4316
FE	EC ID number of contributing deral political committee.	C	10022	Amount of Each Receipt this Period 100.00
Gi <u>Co</u>	ame of Employer uardian Life Insurance occipt For:	Occupation Insurance Aggregate		Semi-Monthly Payroll Deduction
	Primary General Other (specify)	33 13111	500.00	
Ale	III Name (Last, First, Middle Initial) exander Grant			Date of Receipt
IVI2	ailing Address 345 Essex 57 St Apt 16D			06 25 2008
Cit	ty ew York	State NY	Zip Code 10022	Transaction ID: SA11AI.4315 Amount of Each Receipt this Period
FE	FEC ID number of contributing federal political committee. Name of Employer Guardian Life Insurance Co		10022	100.00
Gu <u>Co</u>			e	Semi-Monthly Payroll Deduction
He	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
SUB	TOTAL of Receipts This Page (optional)			300.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 14 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to MPANY OF AMERICA POLITICAL ACTION	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Thomas Greaney Mailing Address 33-3411 Hudson St City Jersey City FEC ID number of contributing federal political committee. Name of Employer Guardian Life Insurance Receipt For: Primary General Other (specify)	State Zip Code NJ 07302 C Occupation Assistant Vice President Aggregate Year-to-Date 250.00	Date of Receipt M M D D Q Q Q Q Q Q Q Q
Full Name (Last, First, Middle Initial) Thomas Greaney Mailing Address 33-3411 Hudson St City Jersey City FEC ID number of contributing federal political committee. Name of Employer Guardian Life Insurance Receipt For: Primary General Other (specify)	State Zip Code NJ 07302 C Occupation Assistant Vice President Aggregate Year-to-Date 300.00	Date of Receipt M M M D D D 25 2008 Transaction ID: SA11AI.4318 Amount of Each Receipt this Period 50.00 Semi-Monthly Payroll Deduction
Full Name (Last, First, Middle Initial) Mondo Lee Mailing Address 18 Nottingham Rd City West Orange FEC ID number of contributing federal political committee. Name of Employer Guardian Life Insurance Receipt For: Primary General Other (specify)	State Zip Code NJ 07052 C Occupation Attorney Aggregate Year-to-Date 240.00	Date of Receipt M M M C D D C 25 2008 Transaction ID: SA11AI.4324 Amount of Each Receipt this Period 40.00 Semi-Monthly Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	140.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 14 (check only one) X 11a
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	GUARDIAN LIFE INSURANCE COM LIFE PAC	PANY OF AN	MERICA POLITICAL ACTION	N COMMITTEE (GUARDIAN
A.	Full Name (Last, First, Middle Initial) Dennis Manning			Date of Receipt
	Mailing Address 81 Graenest Ridge Ro		7in Code	04 25 2008
	City Wilton	State CT	Zip Code 06897	Transaction ID: SA11AI.4326 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Guardian Life Insurance	Occupation Chief Ex	on ecutive Officer	Semi-Monthly Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
– В.	Full Name (Last, First, Middle Initial) Dennis Manning			Date of Receipt
	Mailing Address 81 Graenest Ridge Ro	d		05 29 2008
	City	State	Zip Code	Transaction ID: SA11AI.4328
	Wilton	CT	06897	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00 Semi-Monthly Payroll Dedu-
	Name of Employer Guardian Life Insurance	Occupation Chief Ex	on ecutive Officer	ction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_ С.	Full Name (Last, First, Middle Initial) Dennis Manning			Date of Receipt
	Mailing Address 81 Graenest Ridge Ro	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Wilton	State CT	Zip Code 06897	Transaction ID: SA11AI.4327 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Guardian Life Insurance	Occupation Chief Ex	on ecutive Officer	Semi-Monthly Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	SUBTOTAL of Receipts This Page (optional)			300.00
	TOTAL This Period (last page this line numbe		<u> </u>	

A.

В.

age// 2000 1000 100		
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 12 / 14 (check only one)
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) GUARDIAN LIFE INSURANCE COMPLLIFE PAC	ANY OF AMERICA POLITICAL ACTION	I COMMITTEE (GUARDIAN
Full Name (Last, First, Middle Initial) Richard O'Donnel		Date of Receipt
Mailing Address 46 Longfellow Lane		06 25 7 2008
City	State Zip Code	Transaction ID: SA11AI.4330
Mahwah	NJ 07430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Guardian Life Insurance	Occupation Vice President	Semi-Monthly Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Douglas Phipps		Date of Receipt
Mailing Address 36 Hoyt St		06 25 7 2008
City	State Zip Code	Transaction ID: SA11AI.4333
<u>Darien</u>	CT 06820	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Guardian Life Insurance	Occupation Vice President	Semi-Monthly Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	

240.00

SUBTOTAL of Receipts This Page (optional)	•	80.00
TOTAL This Period (last page this line number only)	•	1560.00

Primary

Other (specify)

General

SCHEDULE B (FEC Form 3X)

SCHEDOLE B (I EC I OHII	/ Use separate schedule((check only one)	GE 13 / 14
ITEMIZED DISBURSEMEN	for each category of the Detailed Summary Page		25 29
or for commercial purposes, other than us		ed by any person for the purpose of soliciting co al committee to solicit contributions from such c	
NAME OF COMMITTEE (In Full) GUARDIAN LIFE INSURANCE LIFE PAC	COMPANY OF AMERICA POLIT	CAL ACTION COMMITTEE (GUARDIAN	١
Full Name (Last, First, Middle Initial) AMERICAN COUNCIL OF LIFE ITTEE	INSURERS POLITICAL ACTION	COMM- Transaction ID: SB23.4 Date of Disbursement	
Mailing Address 101 Constituti Suite 700		04	2008
City Washington	State Zip Code DC 20001	Amount of Each Disburser	
Purpose of Disbursement		011	5000.00
Candidate Name AMERICAN COUNCIL OF LIFE COMMITTEE Office Sought: House	INSURERS POLITICAL ACTION Disbursement For:	Category/ Type	
Senate President State: District:	Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Friends of Phil Steck	1	Transaction ID: SB23.4	4345
-	EARL STREET 4TH FLOOR	Date of Disbursement O 6 1 0 7	2008
City	State Zip Code	Amount of Each Disburser	ment this Perio
ALBANY Purpose of Disbursement	NY 12211		250.00
Candidate Name PHILLIP G STECK		O11 Category/ Type	
Office Sought: X House Senate President State: NY District: 21	Disbursement For: 2008 X Primary General Other (specify)	-	
Full Name (Last, First, Middle Initial) Paul W Hodes		Transaction ID: SB23.4 Date of Disbursement	
Mailing Address 26 South Mair	n St.#253	06 / 28 / Y	2008
City Concord	State Zip Code NH 03301	Amount of Each Disburser	ment this Perio
Purpose of Disbursement		011	1000.00
Candidate Name Paul W Hodes		Category/ Type	
Office Sought: X House Senate President State: NH District: 02	Disbursement For: 2008 X Primary General Other (specify)	•	
			6050.00
SUBTOTAL of Disbursements This Page	ge (optional)	<u> </u>	6250.00
TOTAL This Period (last page this line	number only)		6250.00

SCHEDULE B (FEC Form 3X)

SCHEDOLL B (I LC I OHH SX)	Use separate schedule((check onl	: NUMBER: PAGE 14 / 14 v one)		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22 23 24 25 28a 28b 28c X 29		
Any Information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)					
GUARDIAN LIFE INSURANCE COMP LIFE PAC	ANY OF AMERICA POLITI	CAL ACTION (COMMITTEE (GUARDIAN		
Full Name (Last, First, Middle Initial) Chase Manhattan Bank			Transaction ID: SB29.4341 Date of Disbursement 0 4 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 221 Park Avenue So					
City New York	State Zip Code NY 10003	_	Amount of Each Disbursement this Period		
Purpose of Disbursement Bank Service Charge Candidate Name		001	30.69		
	oursement For:	Category/ Type			
Senate President	Primary General Other (specify) ▼				
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB29.4343		
Chase Manhattan Bank			Date of Disbursement		
Mailing Address 221 Park Avenue So		$ \begin{bmatrix} 0.5 & 0.5 \\ 0.5 & 0.5 \end{bmatrix} \begin{bmatrix} 0.5 & 0.5 \\ 0.5 & 0.5 \end{bmatrix} \begin{bmatrix} 0.5 & 0.5 \\ 0.5 & 0.5 \end{bmatrix} \begin{bmatrix} 0.5 & 0.5 \\ 0.5 & 0.5 \end{bmatrix} \begin{bmatrix} 0.5 & 0.5 \\ 0.5 & 0.5 \end{bmatrix} \begin{bmatrix} 0.5 & 0.5 \\ 0.5 & 0.5 \end{bmatrix} $			
City New York	State Zip Code NY 10003		Amount of Each Disbursement this Perio		
Purpose of Disbursement Bank Service Charge		001	28.66		
Candidate Name		Category/ Type			
Senate President	oursement For: Primary General Other (specify) ▼				
State: District: Full Name (Last, First, Middle Initial) Chase Manhattan Bank			Transaction ID: SB29.4344 Date of Disbursement		
Mailing Address 221 Park Avenue So	uth		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & N \\ Y & Y & O & N \end{bmatrix} $		
City New York	State Zip Code NY 10003		Amount of Each Disbursement this Perio		
Purpose of Disbursement Bank Service Charge		001	28.26		
Candidate Name		Category/ Type			
Office Sought: House Dist Senate President State: District:	oursement For: Primary General Other (specify)				
I			07.04		
SUBTOTAL of Disbursements This Page (option	nal)	>	87.61		
TOTAL This Period (last page this line number	onlv)		87.61		